

FINAL BILL REPORT

ESHB 1523

C 14 L 18

Synopsis as Enacted

Brief Description: Requiring health plans to cover, with no cost sharing, all preventive services required to be covered under federal law as of December 31, 2016.

Sponsors: House Committee on Health Care & Wellness (originally sponsored by Representatives Robinson, Johnson, Cody, Harris, Pollet, Doglio, Appleton, Fitzgibbon, Tharinger, Farrell, McBride, Fey and Macri).

House Committee on Health Care & Wellness
Senate Committee on Health Care
Senate Committee on Health & Long Term Care

Background:

The federal Patient Protection and Affordable Care Act requires health plans to cover the following preventive services with no cost sharing:

- items or services with an "A" or "B" rating from the United States Preventive Services Task Force;
- immunizations recommended by the Advisory Committee on Immunization Practices of the Centers for Disease Control and Prevention;
- preventive care and screenings for children recommended by the United States Health Resources and Services Administration's (HRSA) Bright Futures Project; and
- additional services supported by the HRSA.

Preventive services covered by this requirement include:

- immunizations for certain diseases, including diphtheria, hepatitis, influenza, and measles;
- autism screening for children aged 18-24 months;
- blood pressure and cholesterol screenings;
- screenings for certain diseases, including diabetes, colorectal cancer, and HIV; and
- contraception for women (this requirement is limited under some circumstances by federal rule and Supreme Court precedent).

Summary:

This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not a part of the legislation nor does it constitute a statement of legislative intent.

A health plan must, at a minimum, provide coverage for the same preventive services required by the Patient Protection and Affordable Care Act (PPACA) and any federal rules or guidance in effect on December 31, 2016, implementing the PPACA's preventive services requirement. The health plan may not impose cost-sharing requirements for these preventive services. The Insurance Commissioner must enforce the requirement consistent with federal rules, guidance, and case law in effect on December 31, 2016, applicable to the preventive services requirement in the PPACA.

Votes on Final Passage:

House	70	28
House	56	38
Senate	27	22

Effective: June 7, 2018